

TOWN OF HARRISON VILLAGE OF HARRISON

ALFRED F. SULLA, JR. MUNICIPAL BUILDING BUILDING DEPARTMENT 1 HEINEMAN PLACE HARRISON, NY 10528 Phone: 914-670-3050

Phone: 914-670-3050 Fax: 914-835-7491



MEMORANDUM

To: JACKIE GREER, TOWN CLERK

From: ROBERT FITZSIMMONS, BUILDING DEPT.

Date: January 23, 2015

Re: SPECIAL EVENT PERMIT BLOCK-LOT: 0521.-26 - Application #: 15-22175

THE BUILDING DEPARTMENT IS IN RECEIPT OF THE ATTACHED SPECIAL EVENT PERMIT FROM THE FOLLOWING PROPERTY OWNER AND/OR ORGANIZATION:

ST JOSEPH'S HOSPITAL YONKERS 275 NORTH ST HARRISON, NY 10528

THEY WILL BE HAVING THEIR 6^{TH} ANNUAL 5K RUN/WALK ON SATURDAY MAY 9^{TH} , 2015. THEY HAVE REQUESTED THAT THE FEE BE WAIVED, AND ASSISTANCE FROM THE HARRISON POLICE DEPT. I AM REQUESTING TO PUT THEM ON THE NEXT AGENDA FOR APPROVAL BY THE TOWN BOARD.



2015 JAN 13 AH11: 56

January 6, 2015

Town/Village of Harrison Alfred F. Sulla, Jr. Municipal Building 1 Heineman Place Harrison, NY 10528

To Whom It May Concern:

St. Vincent's Hospital Westchester 6th Annual 5k Run/Walk event is planned for Saturday May 9, 2015. We are requesting to be placed on the Town/Village Board agenda for event approval and enable us to proceed with the advertising and marketing of the event. The details of the event are as follows:

DESCRIPTION: 5K Run / Walk ~ The Marie and George Doty - St. Vincent's Hospital Spring Sprint

DATE:

Saturday, May 9, 2015

RAINDATE:

(none)

TIME:

Check-in 8:00 a.m. Start 9:00 a.m.

Finish 11:30 a.m.

LOCATION:

St. Vincent's Hospital, 275 North Street, Harrison - Start and Finish

Race Course: North Street, right Park Drive S, right Manhattan Avenue, left Park Drive S, return to hospital.

CONTACT:

Meg Sutton, Director of Development,

St. Vincent's Hospital,

914 925-5411 msutton@svwsjmc.org

Updated copies of the hospital's COI, certificate of Worker's Compensation insurance and NYS Disability form will be sent shortly along with the notarized copies of the application. We are asking if the special event fee can be waived. We will be using the services of the Harrison police and would be grateful to Mayor Belmont if he would serve as the Official Starter. Please contact me at the number listed below if there are any questions or further information needed to proceed with our request. I look forward to hearing from you soon.

Sincerely,

Meg Sutton Director of Development 914 925-5411

TOWN/VILLAGE OF HARRISON

SPECIAL EVENT PERMIT APPLICATION

Permit #	15-22175
Date:	1/23/15
Amount	
Receipt #	
	ICIAL USE ONLY

PURSUANT TO CHAPTER 106, BUILDING PERMIT FEE; OUTDOOR ASSEMBLIES, OF THE CODE OF THE TOWN/VILLAGE OF HARRISON, NY

The installation of all temporary structures shall be secured and clearances for exiting shall comply with Section 765.3C of the Uniform Code of the State of New York.

226. Novy Sheet 1/2	115.1
PROPERTY LOCATION 275 Novth Street, Harrison	7. 104
BLOCK 521 LOT 26	
OWNER: Saint Joseph's Medical CenterPHONE 914 378	7506
ADDRESS: 127 South Broadway Yonkers, NY	
LESSEE: PHONE ()	
ADDRESS:	
DATE(S) OF EVENT: Saturday, May 9, 2015	
	110011
DESCRIPTION OF EVENT: 5/K Spring Sprint Bu	n/warn.
OI FACE CLIDANT THE FOLLOWING.	
PLEASE SUBMIT THE FOLLOWING:	
1) A SITE PLAN SHOWING THE LOCATION OF ALL TENTS, GRANDSTANDS, BLEACHERS, CONCESSION STANDS, STAGES AND PARKING FACILITIES.	()
2) SPECIAL INDEMNIFICATION FORM (ATTACHED)	()
3) LIABILITY INSURANCE 4) PERMIT FEE OF \$500.00	()
4) PERMIT FEE OF \$500.00	()
PLEASE NOTE: THAT AN ELECTRICIAN MUST FILE FOR AN ELECTRICAL PERMI LIGHTING, GENERATORS, ETC.	IT FOR TEMPORARY
Bernadette Kingham-Bez	_ being duly sworn,
Owner, Lessee, or Agent) Saint Joseph's Medical Center is to	the owner in fee of the
premises to which this application applies: that he/she (the applicant) is duly authorized	to make this
application; and that the statements contained herein are true to the best of his/her know	wiedge and belief.
Sworn to before me this 2	1 generally
day of January 20 15. Signatu	ire of Applicant)
Trances	a Tymell
HANCESCA TYRRELL (Note	ary Public)
Notary Public, State of New York	

Notary Public, State of New York
No. 01TY4936902
Qualified in Westchester County
Commission Expires August 15, 20



2015 JAN 13 ANTH: 56.

January 6, 2015

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